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**CONFIDENTIAL ATTORNEY-CLIENT  
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Date: NOVEMBER 25, 2003

To: EXAMINER SHARAD K. RAMPURIA  
U.S. PATENT AND TRADEMARK OFFICE

Fax #: (703) 872-9315

From: DARRIN WESLEY HARRIS  
Fax #: (847) 905-7111

Client/Matter No.: PHB 34,367 (7790/175)

# of Pages: 11  
(including cover sheet)

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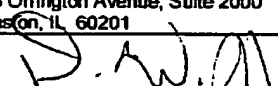
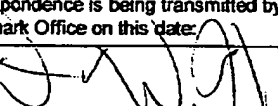
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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No.	PHB 34,367 (7790/175)
	Application Number	09/616,635
	Filing Date	JULY 28, 2000
	First Named Inventor	KEVIN R. BOYLE
	Group Art Unit	2683
	Examiner	RAMPURIA, S.

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to Final Office Action Dated October 3, 2003 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Status Letter <input type="checkbox"/> Petition for Extension of Time Request (dup) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/68) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		
<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.138(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.		

## CALCULATION OF FEE

				Small Entity		Large Entity			
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus		0	x \$9=	0		x \$18=	
Indep.		Minus		0	x \$43=	0		x \$86=	
First Presentation of Multiple Dep. Claim					+ \$145=	—		+ \$290=	
					total add'l fee	\$ 0		total add'l fee	\$

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	DARRIN WESLEY HARRIS Registration No. 40,636 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			Date: November 25, 2003
CERTIFICATE OF FACSIMILE			
I hereby certify that this correspondence is being transmitted by facsimile to (703) 872-9315 to the U.S. Patent and Trademark Office on this date: <u>November 25, 2003</u>			
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